Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

| TITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)   Docket Number (Optional)   |                       | I    |
|---|-----------------------|------|
| FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)   | 112440-727            |      |
| Application Number 10/074,209   | Filed February 12, 20 | 002  |
| For AIR TREATMENT DEVICE HAVING MULTIPLE DOWNSTREAM ELECTRODES (As Amended)   |                       |      |
| Art Unit 1711   | Examiner Thao T. Tra  | an   |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |                       |      |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |                       |      |
| <u>Fee</u>  | Small Entity Fee      |      |
| One month (37 CFR 1.17(a)(1)) \$120   | \$60 \$ <sub>.</sub>  |      |
| Two months (37 CFR 1.17(a)(2)) \$450  | \$225 \$              |      |
| x Three months (37 CFR 1.17(a)(3)) \$1020   | \$510 \$              | 1020 |
| Four months (37 CFR 1.17(a)(4)) \$1590  | \$795 \$.             |      |
| Five months (37 CFR 1.17(a)(5)) \$2160  | \$1080 \$             |      |
| Applicant claims small entity status. See 37 CFR 1.27.  |                       |      |
| A check in the amount of the fee is enclosed.   |                       |      |
| Payment by credit card. Form PTO-2038 is attached.  |                       |      |
| The Director has already been authorized to charge fees in this application to a Deposit Account.   |                       |      |
| The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number  |                       |      |
| WARNING: information on this form may become public. Credit card information should not be included on this form.<br>Provide credit card information and authorization on PTO-2038.                   |                       |      |
| I am the applicant/inventor.  |                       |      |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).  |                       |      |
| x attorney or agent of record. Registration Number _  | 45,117                |      |
| attorney or agent under 37 CFR 1.34.  Registration nymbe (Tacting under 37 CFR 1.34   |                       |      |
|   | February 14, 2007     |      |
| Signature   | Date                  |      |
| Renato L. Smith   | 312.807.4443          |      |
| Typed or printed name Telephone Number  |                       | mber |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. |                       |      |
| Total of forms are submitted.   |                       |      |

This collection of information is required by 37 CFR 1.138(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO of process) an application. Confidentially is governed by 53 U.S. C. 122 and 7 CFR 1.11 and 1.14. This collection is estimated to bate of minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this butters, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. 80: 1490, Alexandrics, VA 2231-1490. DO NOT SEND FEES OR COMPLETED FORMS TO TIME ADDRESS. SEND TO: Commissioner for Patentin, P.O. Box 1490, Alexandrics, VA 2231-1490. DO NOT SEND FEES OR COMPLETED FORMS TO TIME ADDRESS. SEND TO: Commissioner for Patentin, P.O. Box 1490, Alexandrics, VA 2231-1490.